



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 5

Application Number	10/678,691
Filing Date	October 3, 2003
First Named Inventor	Christian Mueller
Art Unit	2858
Examiner Name	
Attorney Docket No.	ITC-338US

ENCLOSURES (Check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment/Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/Declaration(s)

<input type="checkbox"/> Extension of Time Request

<input type="checkbox"/> Express Abandonment Request

<input type="checkbox"/> Information Disclosure Statement

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Response to Missing Parts/
Incomplete Application

<input type="checkbox"/> Response to Missing Parts under
37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)

<input type="checkbox"/> Licensing-related Papers

<input type="checkbox"/> Petition

<input type="checkbox"/> Petition to Convert to a
Provisional Application

<input type="checkbox"/> Power of Attorney, Revocation,
Change of Correspondence
Address

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Request for Refund

<input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication
to Group

<input type="checkbox"/> Appeal Communication to Board
of Appeals and Interferences

<input type="checkbox"/> Appeal Communication to Group
(Appeal Notice, Brief, Reply
Brief)

<input type="checkbox"/> Proprietary Information

<input type="checkbox"/> Status Letter

<input checked="" type="checkbox"/> Other Enclosure(s) (please
identify below):

Return Postcard |
|---|--|---|

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual	Lawrence E. Ashery	Registration No. (Attorney/Agent)	34,515
Signature			
Date	January 8, 2004		

CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

January 8, 2004

Name (Print/Type) Lawrence E. Ashery

Signature

Date January 8, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

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Application No. 10/678,691

ITC-338US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 10/678,691
Applicant: Christian Mueller
Filed: October 3, 2003
Title: ADJUSTABLE TEST HEAD DOCKING APPARATUS
TC/A.U.: 2858
Examiner:
Confirmation No.: 9956
Docket No.: ITC-338US

PRELIMINARY AMENDMENT

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Prior to examination, please amend the above-identified application as follows:

- ☒ **Amendments to the Specification** begin on page **2** of this paper.
- ☐ **Amendments to the Claims** are reflected in the listing of claims which begins on page _____ of this paper.
- ☐ **Amendments to the Drawings** begin on page _____ of this paper and include an attached replacement sheet(s).
- ☐ **Amendments to the Abstract** are on page _____ of this paper. A clean version of the Abstract is on page _____ of this paper.
- ☐ **Remarks/Arguments** begin on page _____ of this paper.

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